



ENERGY AND ENVIRONMENT CABINET

**DEPARTMENT FOR ENVIRONMENTAL PROTECTION
DIVISION OF WASTE MANAGEMENT
200 FAIR OAKS, 2ND FLOOR
FRANKFORT, KY 40601
TELEPHONE NUMBER (502) 564-6716**

Application to Transfer Ownership of a Solid Waste Permit Form DEP 7104 (11/96)

GENERAL INSTRUCTIONS

- 1. APPLICABILITY** - This transfer application form must be completed and submitted to the Cabinet by persons who are assuming ownership of an existing permitted solid waste site or facility.
- 2. ASSISTANCE** - Questions regarding this application form may be directed in writing to the Division of Waste Management, Solid Waste Branch, at the address listed above or by calling (502) 564-6716.
- 3. SUBMISSION** - Please type or print legibly. Submit the original and two (2) copies of the completed application form to the Division of Waste Management at the address noted above. If an item is not applicable to your facility, write "N/A" in the space provided. The Cabinet shall not begin the processing of the application until the applicant has fully complied with the application requirements.
- 4. FEES** - Applicants must submit a \$500.00 filing fee at the time of

application submittal in accordance with 401 KAR 47:090, Section 2(6)(d).

5. LAWS AND REGULATIONS - Applicants are expected to understand and comply with all laws and regulations applicable to solid waste management, treatment and disposal.

To assist you in the submittal of a complete and accurate application, the Division has identified the most common errors made in the review process. These errors are listed below for your convenience.

1. Failure to provide the \$500.00 fee. See 401 KAR 47:090, Section 2. (6)(d).
2. Failure to complete the application. All maps, attachments, and supplemental data must be submitted with this application.
3. Failure to comply with public notice requirements. See KRS 224.40-310 and 401 KAR 47:140, Section 7 for more information.
4. Failure to comply with Financial Assurance requirements. If the existing financial assurance is insufficient to fully cover current closure and post-closure costs, updates will be required.
5. Failure to properly sign and notarize the application. An individual with signature authority for the applicant as defined by KRS 224.01-010(44) and 401 KAR 47:160 must sign and notarize the appropriate signature sections of the application.
6. Failure to provide appropriate, fully completed attachments. Maps, drawings, narratives or any attachments that lack sufficient detail or drawings that are not signed, dated and sealed by a professional engineer or geologist may cause delays in the review and approval of the application.

APPLICATION TO TRANSFER
SOLID WASTE PERMIT

A. Ownership Information

Application No. _____ (To be assigned by Cabinet)

Fee submitted \$ _____ County _____ Date _____

Method of Payment _____ Check _____ Certified Check _____ Money Order

1. Applicant _____

Address _____

City _____ State _____ Zip Code _____

Phone No. (_____) _____ -- _____

Contact Person _____

2. Mailing Address (if different from above)

Address _____

City _____ State _____ Zip Code _____

Phone No. (_____) _____ -- _____

Contact Person _____

3. Correction to applications are to be made by:

Address _____

City _____ State _____ Zip Code _____

Phone No. (_____) _____ -- _____

4. Applicant Legal Status: _____ Government _____ Private

5. Do you now hold, or have you held, any other permit or approval to dispose of waste from the Division including a landfarming permit, registered permit-by-rule, sludge giveaway, or permit modification to landfill? If so, state type, permit number if applicable, and date permit or approval was granted.

Type	Permit Number if Applicable	Date of Approval	Landfill Name if Applicable	Landfill Permit Number if Applicable

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B. Ownership Information

1. Indicate, by checking the appropriate blank, the legal organizational structure of the applicant:
☐ Proprietorship
☐ Partnership ☐ General ☐ Limited
☐ Corporation
☐ Joint Venture
☐ Government Agency
☐ Other. Describe _____

2. If the owner is a corporation, is it registered with the Kentucky Secretary of State?
☐ Yes ☐ No
3. For the applicant and each person meeting the definition of key personnel, provide a Past Performance Information form as required by KRS 224, 40-330. The Cabinet has developed form DEP 7087 for submittal of this information. Complete this form and include it as part of this application as Attachment 1.

NOTE: DEP Form No. 7087 may be obtained by contacting the Division of Waste Management at the address specified on the "instructions" page of this application.

C. Existing Permit Information

1. Provide a copy of the current permit for which a transfer is being considered. *Label as Attachment 2.*
2. Provide an affidavit signed by the current permittee stating that ownership of the solid waste site or facility is being transferred to another person. The affidavit shall contain the name, address and telephone number of the person or entity that is to become the new owner of the site and facility. *Label as Attachment 3.*
3. Provide a copy of the deed or lease of the site or facility. *Label as Attachment 4.*

D. Financial Responsibility

Provide, as *Attachment 5*, copies of the financial assurance mechanisms executed by the applicant to satisfy the requirements of 401 KAR 48:310.

E. Operational Responsibility

Provide, as *Attachment 6*, an affidavit signed by the applicant that acknowledges the contents of the permit for which a transfer is being considered. This affidavit must also state that the applicant agrees to comply with all laws and regulations applicable to the ownership, operation and management of the solid waste site or facility, and that the applicant agrees to comply with the provisions of the existing permit that is being transferred.

F. Public Notice

A public notice may be required for an application to transfer a solid waste site or facility permit in accordance with 401 KAR 47:130, Section 3. A draft notice is found in Attachment 7. Complete the public notice form. However, only those applicants notified by correspondence from the Cabinet may publish the notice.

F. Certification

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations"

Original Signature of Responsible Official

Date

Typed Name of Responsible Official

Title

Name of Applicant, i.e., Corporation or Unit of Government

Subscribed and sworn to before me by: _____

this the _____ day of _____, 19 _____

Notary Public Signature _____

My Commission Expires _____

PUBLIC NOTICE

Pursuant to Application No. _____

The Natural Resources and Environmental Protection Cabinet, Division of Waste Management, has received an application to transfer a solid waste site or facility permit from, and has prepared a permit for:

Name of Applicant _____

Name of Facility _____

Address _____

City _____ State _____ Zip Code _____

This application, if approved, would allow the transfer of the permit to accept the following types of waste and the following activities: _____

The proposed facility may be accessed from _____
by traveling _____

Additional information regarding this application may be obtained from:

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone No. (_____) _____ -- _____

All data submitted by the applicant and other documents concerning this application are available for public inspection during normal business hours at the following location:

Office _____

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Address _____

City _____ State _____ Zip Code _____

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The permit application is being processed at the following location:

Division of Waste Management
Solid Waste Branch
14 Reilly Road
Frankfort, Kentucky 40601-1190

Any person who wishes to comment on the transfer of this solid waste site or facility may file comments with the Cabinet within thirty (30) days of the publication of this notice pursuant to 401 KAR 47:140.

Please refer to Application No. _____ on all correspondence.

The Cabinet does not discriminate on the basis of race, color, national origin, sex, religion, age, or disability in employment or the provision of services and provides, upon request, reasonable accommodations including auxiliary aids and services all programs and activities. To request alternate formats for printed information contact Debra Morgan at (502) 564-6716 or (502) 564-2225, extension 695. Publication of this notice is pursuant to KRS 224, 40-310.